

ch. 5145 in drawer

# APPLICATION TO CONDUCT A LOTTERY / RAFFLE

FEE: \$10.00; TERM: 1 YEAR FROM DATE OF ISSUANCE

RETURN TO:  
City Clerk's Office  
555 S. 10<sup>th</sup> St.  
Lincoln NE 68508

LMC Chapter 9.32

Please PRINT using blue or black ink only.

PLEASE CIRCLE ONE:

LOTTERY

RAFFLE

## APPLICANT

NAME:	ARTHRITIS FOUNDATION, NEBRASKA CHAPTER				
ADDRESS:	7101 NEWPORT AVE #304				
CITY:	OMAHA	STATE:	NE		
ZIP:	68152	PHONE#:	402-572-3048	FAX#:	402-572-3048

## ORGANIZATION (HEADQUARTERS ADDRESS)

NAME:	ARTHRITIS FOUNDATION, NEBRASKA CHAPTER				
ADDRESS:	7101 NEWPORT AVE #304				
CITY:	OMAHA	STATE:	NE		
ZIP:	68152	PHONE#:	402-572-3048	FAX#:	402-572-3048

## NAME & ADDRESS OF PRINCIPAL OFFICERS

NAME	STREET	CITY	STATE	ZIP
ANNE HELLBUSCH	7101 NEWPORT AVE #304	OMAHA	NE	68152
SUZANNE ROBERT	7101 NEWPORT AVE #304	OMAHA	NE	68152
RANDY HORN	MUTUAL PLAZA OMAHA	OMAHA	NE	68175

## PERSON IN DIRECT CHARGE OF CONDUCTING THIS LOTTERY/RAFFLE

NAME:	ANNE HELLBUSCH				
ADDRESS:	7101 NEWPORT AVE #304				
CITY:	OMAHA	STATE:	NE		
ZIP:	68152	PHONE#:	402-572-3048	FAX#:	402-572-3048

PERSON(S) RESPONSIBLE FOR THE PROPER UTILIZATION OF THE GROSS RECEIPTS FROM THIS LOTTERY/RAFFLE:					
NAME:	MARY ANN ARNOLDE				
ADDRESS:	7101 NEWPORT AVE #304				
CITY:	OMAHA	STATE:	NE		
ZIP:	68152	PHONE#:	402-572-3040	FAX#:	402-573-3040

Specific nature & type of lottery/raffle to be conducted (attach sample of ticket to be sold): FUNDRAISER

Describe method of selecting winning ticket: RANDOM

List the specific purpose(s) to which the profits from the conduct of the lottery/raffle are to be devoted: ARTHRITIS FOUNDATION - SERVICE FOR PROGRAMS

Price of Each Lottery/Raffle Chance: 100.00

Describe the prizes, money, or merchandise to be given away (be specific-use separate sheet if necessary): HARLEY DAVIDSON MOTORCYCLE  
JEWELRY ITEM

Date Lottery/Lotteries or Raffle(s) will begin & end:

<u>Feb. 28, 2002</u>	<u>APRIL 4, 2002</u>
From	To
From	To
From	To
From	To

How many lotteries/raffles will be conducted during the term of this permit: 1

THE FOLLOWING MUST BE ATTACHED *PRIOR* TO SUBMITTING TO THE CITY CLERK:

- ☒ Proof of applicant's authority to conduct a lottery/raffle, pursuant to State Law.
- ☒ On a separate sheet of paper, list all locations within the City of Lincoln where the lottery/raffle tickets (chances) are to be sold.
- \_\_\_\_\_ Sample of Ticket to be sold

ADDITIONAL COMMENTS/EXPLANATION *(use separate sheet if necessary)*:

PLEASE NOTE: At the conclusion of *each* lottery described herein, a notarized report fully setting forth the gross amount raised by such lottery shall be placed on file in the Office of the City Clerk.

1/30/02  
Date

Mary A. White  
Applicant's Signature

*Applications are available on the City's web site at "www.ci.lincoln.ne.us"*

\*\*\*\*\*  
FOR OFFICE USE ONLY  
\*\*\*\*\*

Date Forwarded to Council: \_\_\_\_\_ Date of Public Hearing before Council: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Other Conditions:

Date Permit Issued: \_\_\_\_\_ Date Permit Expires: \_\_\_\_\_ Receipt #: \_\_\_\_\_

## NEBRASKA CHAPTER

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**VOLUNTEER OFFICER**

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**CHAIRMAN-ELECT**

Lin Simmonds

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**VICE-CHAIRMEN**

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M. Shaun McGaughey

Deenie Meyerson

Richard Ramm

**SECRETARY/TREASURER**

Richard Ramm

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**LIFE MEMBERS**

Dome Dugan

Jane Stubbs

Vernon G. Ward, M.D.

**PRESIDENT and CEO**

Anne Hellbusch

January 30, 2002

To Whom It May Concern:

The Lincoln Gala Raffle tickets will be mailed to individuals attending the Gala from our Omaha office. That address is: 7101 Newport Avenue, Suite 304, Omaha, Nebraska 68152.